

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000071177

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** WALTERS ZACKRIA ASSOCIATES, PLLC

**Current Principal Place of Business:**

620 SE FIRST STREET  
FORT LAUDERDALE, FL 33301-201

**New Principal Place of Business:**

**Current Mailing Address:**

620 SE FIRST STREET  
FORT LAUDERDALE, FL 33301-201

**New Mailing Address:**

**FEI Number:** 20-2365592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WALTERS, ROBERT S PRES.  
620 SE 1ST STREET  
FORT LAUDERDALE, FL 33301 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WALTERS, ROBERT S  
Address: 620 SE FIRST STREET  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGR  
Name: ZACKRIA, ABBAS H  
Address: 620 SE FIRST STREET  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGR  
Name: SCALA, ANTHONY M  
Address: 620 SE FIRST STREET  
City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT WALTERS

MGR

02/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date